PTO/SB/30 (10-07) 07. OMB 0651-0031

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Request	Application Number	08/485,943
for		June 7, 1995
Continued Examination (RCE)	Filing Date	Jeffrey M. Friedman
Transmittal	First Named Inventor	
Address to: Mail Stop RCE	Art Unit	1632
Commissioner for Patents P.O. Box 1450	Examiner Name	WILSON, Michael C.
Alexandria, VA 22313-1450	Attorney Docket Number	16454.0005
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs into the submitted to the USPT() or page 2.		
 Submission required under 37 CFR 1.114] Note: If the RCE is proper, any previously filed unentared amendments and amendments enclosed with the RCE will be entered in the order in which they were fided unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). 		
Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.		
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on		
ii Other		
b. X Enclosed		
I. X Amendment/Reply iii, Information Disclosure Statement (IDS)		
jj, Affidavit(s)/ Declaration(s) iv. Other		
2. Miscellaneous		
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a a. period ofmonths. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)		
b. Other		
The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filled.		
The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to		
a. X Deposit Account No. 19-4293 . I have enclosed a duplicate copy of this sheet. i. X RCE fee required under 37 CFR 1.17(e)		
ii. Extension of time fee (37 CFR 1.136 and 1.17)		
iii, Other		
b. Check in the amount of \$		
c. Payment by credit card (Form PTO-2038 enclosed)		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
Signature	Date	October 31, 2007
Name (Print/Type) Harold H. Fox		tration No. 41,498
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE. Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.		
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Name (Print/Type) This collection of information is required by 37 CFR 1.114. The information	Date	
to present an explanation of required by 37 CFR 1.114. The information	o is required to optain or retain a benef	Luy trie public which is to the (and by the USPTO

to process) an application. Confidentially is governed by \$1.0.5. 122 and \$7.0FR r.11 and 1.4.1 The colections is strained to take 12 minutes to complete, including planting, propriate, and submitting the completed application for this the USFTO. The will very depending upon the individual case. Any comments on the amount of the you require to complete the form and/or supplements for reducing the business, propriate upon the individual case. Any comments on the amount of the you require to complete the form and/or supplements for reducing the business, they also upon the first individual case. Any comments on the amount of the you require to complete the form and/or supplements for reducing the business, they also the supplements for the first planting the propriate that the propriate the propriate that the propriate t If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.